

DEC 09 2005

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FACSIMILE COVER SHEET

Deliver to: Joseph G. Ustaris, USPTO Art Group: 2617
 Facsimile No.: (703) 872-9306 Date: December 9, 2005
 From: Eric T. King, Reg. No. 44,188
 Our Docket No.: K35A0807 Number of pages 20 including this sheet.
 Application No.: 09/872,197 Filing Date: 5/31/2001
 Docket Due Date(s): 7/6/2005

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: _____ (.12. pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (____ pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: _____ (____ pgs) w/cover & abstract)	<input type="checkbox"/> Petition for: _____
<input type="checkbox"/> Assignment & Cover Sheet (____ pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input type="checkbox"/> Certificate of _____	<input type="checkbox"/> Reply Brief (____ pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA (____ pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: ____ sheets, ____ figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: _____	<input type="checkbox"/> Response to Written Opinion (____ pgs)
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 (____ pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.84)

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Nicole Erqulega 12/9/2005
 Nicole Erqulega Date

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application No.	09/872,197
	Filing Date	May 31, 2001
	First Named Inventor	L. Jeffrey Kapner, III
	Art Unit	2614
	Examiner Name	Kirubel Akhlu
Total Number of Pages in This Submission	15	Attorney Docket Number K35A0807

ENCLOSURES <i>(check all that apply)</i>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Eric T. King, Reg. No. 44,188 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	December 9, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Nicole Erquiaga		
Signature		Date	December 9, 2005

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (v.1) 11/30/2005.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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<h2 style="text-align: center;">FEE TRANSMITTAL for FY 2005</h2> <p style="text-align: center; font-size: small;">Patent fees are subject to annual revision.</p>		Complete if Known	
		Application Number	09/872,197
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	May 31, 2001
TOTAL AMOUNT OF PAYMENT (\$) 0.00		First Named Inventor	L. Jeffrey Kapner, III
		Examiner Name	Kirubel Aklilu
		Art Unit	2614
		Attorney Docket No.	K35A0807

METHOD OF PAYMENT (check all that apply)

Check
 Credit card
 Money Order
 None
 Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below
 Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
 Credit any overpayments

FEE CALCULATION

1. EXTRA CLAIM FEES

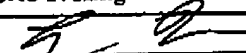
Total Claims	24	- 24*	=	0	x	50.00	=	0.00
Independent Claims	3	- 3*	=	0	x	200.00	=	0.00
Multiple Dependent								

*or number previously paid, if greater, For Retissues, see below

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	2202	50	25	Claims in excess of 20	
1201	2201	200	100	Independent claims in excess of 3	
1203	2203	360	180	Multiple Dependent claim, if not paid	
1204	2204	300	150	**Retissue independent claims over original patent	
1205	2205	300	160	**Retissue claims in excess of 20 and over original patent	
SUBTOTAL (1)					0.00

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	2051	130	65	Surcharge - late filing fee or oath	
1052	2052	50	25	Surcharge - late provisional filing fee or cover sheet.	
2053	2053	130	130	Non-English specification	
1251	2251	120	60	Extension for reply within first month	
1252	2252	450	225	Extension for reply within second month	
1253	2253	1,020	510	Extension for reply within third month	
1254	2254	1,590	795	Extension for reply within fourth month	
1255	2255	2,160	1,080	Extension for reply within fifth month	
1401	2401	500	250	Notice of Appeal	
1402	2402	500	250	Filing a brief in support of an appeal	
1403	2403	1,000	500	Request for oral hearing	
1451	2451	1,510	1,510	Petition to institute a public use proceeding	
1460	2460	130	130	Petitions to the Commissioner	
1807	1807	50	50	Processing fee under 37 CFR 1.17(r)	
1808	1808	180	180	Submission of Information Disclosure Stmt	
1809	1809	790	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	2810	790	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)					
SUBTOTAL (2)					0.00

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Eric T. King	Registration No. (Attorney/Agent)	44,188
Signature		Telephone	(714) 557-3800
		Date	12/09/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/r) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

<h2 style="margin: 0;">FEE TRANSMITTAL for FY 2005</h2> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision.</p>	<i>Complete if Known</i>	
	Application Number	09/872,197
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	Filing Date	May 31, 2001
	First Named Inventor	L. Jeffrey Kapner, III
	Examiner Name	Kirubel Aklilu
	Art Unit	2614
	Attorney Docket No.	K35A0807
TOTAL AMOUNT OF PAYMENT	(\$)	0.00

METHOD OF PAYMENT (check all that apply)

Check
 Credit card
 Money Order
 None
 Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666
 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below
 Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
 Credit any overpayments

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	24	- 24 [*]	0	x	50.00	=	\$0.00
Independent Claims	3	- 3 [*]	0	x	200.00	=	\$0.00
Multiple Dependent							

*For number previously paid, if greater, For Reissues, see below

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	
1202	50	2202	25	Claims in excess of 20	
1201	200	2201	100	Independent claims in excess of 3	
1203	360	2203	180	Multiple Dependent claim, if not paid	
1204	300	2204	150	**Reissue independent claims over original patent	
1205	300	2205	160	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (1)				(\$)	0.00

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	150	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1480	130	2480	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1808	180	1808	180	Submission of Information Disclosure Stmt	
1809	700	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)					
SUBTOTAL (2)				(\$)	

SUBMITTED BY		<i>Complete (if applicable)</i>	
Name (Print/Type)	Eric T. King	Registration No. (Attorney/Agent)	44,188
Signature		Telephone	(714) 557-3800
		Date	12/09/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 12/15/2004.
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Appl. No. 09/872,197
Amndt. Dated 12/9/2005
Reply to Office action of 10/17/2005

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**RESPONSE UNDER 37 CFR § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 2617**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 09/872,197
Applicant : L. Jeffrey Kapner III
Filed : 5/31/2001
TC/A.U. : 2617
Examiner : Joseph G. Ustaris

Docket No. : K35A0807
Customer No. : 8791

Confirmation No. 1905

Mail Stop AF
Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

AMENDMENT UNDER 37 CFR § 1.116

Sir:

In response to the Office Action of October 17, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.